

U.S. Department of Transportation Federal Aviation Administration

800 Independence Ave., SW Washington, DC 20591

February 10, 2003

Instructions for Completing Your New Hull, Comprehensive and Third Party Liability Coverage Policy Valid Until April 14, 2003

Documents

Insurance Policy (26 pages)
Invoice Template
Excel Spreadsheet for Premium Calculations

Completing Documents

INSURANCE POLICY

Page 1 Heading – Enter the official two-or three-digit abbreviation for your air carrier to create the policy number.

Paragraph One - Fill in legal name of business

Page 2 Heading – Complete the policy number

Article I - Fill in legal name of business

Page 3 Article II, C - Enter the dollar amount equal to twice the per-occurrence, per aircraft limit in your commercial liability policy of November 25, 2002.

Page 7 Article VIII, A - Fill in legal name of business. Five separate entries

Page 11 Signature: Fill in legal name of insured. Provide original signature and printed name with title of representative binding the company on two copies of the

PART I (Hull)

Page 12 Heading - Fill in policy number

Amendment.

Article I - Fill in legal name of business

PART II (Comprehensive)

Page 17 Heading - Fill in policy number

Article I, A - Fill in legal name of business

Article II, A - Fill in liability limit for passenger, crew and property

(from Commercial policy in effect on November 25, 2002.

PART III (Third Party Liability)

Page 22 Heading - Fill in policy number

Article I, A - Legal name of business

Article II - Enter the dollar amount equal to twice the per-occurrence, per aircraft

limit in its commercial liability policy of November 25, 2002.

INVOICE AND SPREADSHEET

To Calculate Premium:

Go to the Excel spreadsheet (see link in the website) and enter the data in the highlighted area. Based on the information you enter, the spreadsheet will calculate your deposit premium.

- Enter the deposit premium amount from the spreadsheet on to the invoice.
- Indicate method of payment
- Follow the instructions on the invoice to make payment.

Fill in the following blanks in the invoice

- Invoice Number Add the two- or three-digit airline identifier (booking) code. This number should be referenced on your payment.
- Fill in company name, city, state, zip code, contact information and current date.
- Fill in the information in block section: fleet valuation, enplanements, RPMs & RTMs

Please send payment for receipt at FAA within ten (10) days of the first day of coverage.

Return of Documents

Fax a signed copy of *THE SIGNATURE PAGE ONLY* (Page 11) of the Amendment to FAA Insurance Program Office with as much lead time before the required time and date of coverage as possible.

Fax a copy of the invoice to the FAA as soon as premium is calculated.

Send TWO original signed Amendment documents by courier or overnight delivery. Do not send by U.S. mail. Use only courier service service such as UPS, Fed Ex, DHL, Airborne, etc.

Federal Aviation Administration Aviation Insurance, APO-3, Room 939 800 Independence Avenue, SW Washington, DC 20591

Send an updated fleet schedule that includes serial number, N-number and insured hull and liability values (see Part I, Article II, of the policy).

Fax Numbers: (202) 267-3278, or (202) 267-3324, or (202) 267-5370

Next Steps

Your FAA insurance representative will validate receipt of the correct information. After validation and execution of the Amendment by the FAA, an Insurance Representative will return one signed copy to you and retain one for our records. Upon request we will send you a Certificate of Insurance as confirmation of your coverage.

Questions

Contact your FAA Insurance representative, or:

Eric Nelson, eric.nelson@faa.gov, (202) 267-3090

Helen Kish, helen.kish@faa.gov, (202) 267-9943